

2010 ELECTION CYCLE

Judicial Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
 2010 Judicial Election

Delbert Hosemann
 SECRETARY OF STATE

OCT 08 2010

Campaign Finance
 Secretary of State

DATE STAMP

Name of Candidate WILLIAM E. TISDALECounty HARRISON

Address _____

Telephone Work _____

Home _____

Fax _____

Contact Name TIMOTHY L. MURREmail Address tim@pmrklaw.comOffice Sought CHANCELLOR
☐ Check here if above is different from previous report

- _____ May 10, 2010 Periodic Report (January 1, 2010, through April 30, 2010).....Mandatory
- _____ June 10, 2010 Periodic Report (May 1, 2010, through May 31, 2010).....Mandatory
- _____ July 9, 2010 Periodic Report (June 1, 2010, through June 30, 2010).....Mandatory
- XX October 10, 2009 Periodic Report (July 1, 2010, through September 30, 2010).....Mandatory
- _____ October 26, 2010 Pre-Election Report (October 1, 2010, through October 23, 2010).....Mandatory
- _____ November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010).....Runoff Candidates
- _____ January 10, 2011 Periodic Report (October 1, 2010, through December 31, 2010).....Mandatory
- _____ Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligation) Required to terminate reporting obligations

IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- (2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized + Non-Itemized =	This Period	Calendar Year-To-Date
Total amount of contributions \$	+\$ 100.00	\$ 100.00	\$ 2815.00
Total amount of disbursements \$	+\$ 900.00	\$ 900.00	\$ 1800.00
Total amount of cash on hand		\$ 1,015.00	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

William E. Tisdale
 Signature of Candidate

OCTOBER 8, 2010
 Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.
 Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39206 or fax to 601-359-1489 or 601-578-2819.
 2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

SOS 01-10

Page 1 of 1

Name of Candidate or Committee WILLIAM E. TISDALE
 Reporting period JULY 1 2010 through SEPTEMBER 30 2010

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
KEVIN LANNIER	8/11/10	\$ 900.00
Mailing Address		
6501 AIRPORT BLVD #335	9/9/10	\$ 900.00
City, State, Zip Code		
MOBILE, AL 36608	Aggregate Year-to-date	\$ 1,800.00
Purpose of Disbursement (Optional)		
YARD SIGNS		
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
		\$
Mailing Address		\$
		\$
City, State, Zip Code		\$
	Aggregate Year-to-date	\$
Purpose of Disbursement (Optional)		
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
		\$
Mailing Address		\$
		\$
City, State, Zip Code		\$
	Aggregate Year-to-date	\$
Purpose of Disbursement (Optional)		
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
		\$
Mailing Address		\$
		\$
City, State, Zip Code		\$
	Aggregate Year-to-date	\$
Purpose of Disbursement (Optional)		
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
		\$
Mailing Address		\$
		\$
City, State, Zip Code		\$
	Aggregate Year-to-date	\$
Purpose of Disbursement (Optional)		
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
		\$
Mailing Address		\$
		\$
City, State, Zip Code		\$
	Aggregate Year-to-date	\$
Purpose of Disbursement (Optional)		